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SAS:gtc 4239-66190 245468 01/12/04

KLARQUIST SPARKMAN, LLP
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TO: Office of Initial Patent Examination, Filing Receipt Corrections
Fax No.: 703-746-9195
Total No. Pages: 6 including this cover sheet
Message: Applicants received the attached filing receipt, dated September 26, 2003, with an error in the name of one of the inventors and an error in the Domestic Priority data as claimed by applicant. Corrections have been marked on the attached filing receipt for easy reference. A copy of the Combined Declaration and Power of Attorney (Declaration) that was filed with this application on June 27, 2003 is also attached as Exhibit A. The Declaration shows the correct spelling of the inventor's name and the complete priority data for this application.

Please issue a Corrected Filing Receipt for this application. If you do not receive all pages or if you have problems receiving transmittal, please call Greg T. Euteneier at (503) 226-7391.

In re application of: Martin et al.
Application No. 10/607,598
Filed: June 27, 2003
Confirmation No. 7617
For: METHOD FOR THE TREATMENT OF MULTIPLE SCLEROSIS
Examiner: Not yet assigned
Art Unit: 1646
Attorney Reference No. 4239-66190

CERTIFICATE OF FACSIMILE

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being facsimile transmitted to fax number 703-746-9195 on the date shown below.

Agent for Applicant(s) _____

Date Transmitted January 12, 2004

_____ January 12, 2004
Susan Alpert Siegel, Ph.D. Date
Registration No. 43,121

cc: Docketing

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/607,598	06/27/2003	1646	1032	4239-66190	9	31	4

CONFIRMATION NO. 7617

36218
KLARQUIST SPARKMAN, LLP
121 S.W. SALMON STREET, SUITE #1600
ONE WORLD TRADE CENTER
PORTLAND, OR 97204-2988

FILING RECEIPT

OC000000010932090

Date Mailed: 09/26/2003

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

Applicant(s) Roland
~~Ronald~~ Martin, Bethesda, MD;
Henry McFarland, Gaithersburg, MD;
Bibiana Bielekova, Kensington, MD;

Assignment For Published Patent Application

The Gov. of the USA as represented by the;
Secretary of the Dept. of Health and Human Services;

Domestic Priority data as claimed by applicant

~~This appln claims benefit of 60/393,021 06/28/2002~~

This application is a CIP of PCT/US02/38290 11/27/2002 which claims benefit of 60/393,021 06/28/2002

Foreign Applications

If Required, Foreign Filing License Granted: 09/25/2003

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

Title

Method for the treatment of multipl scl rosis

Preliminary Class

424

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Title 37, Code of Federal Regulations, 5.11 & 5.15

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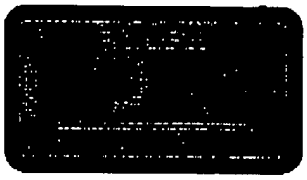
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SAS:jam 06/27/03 202856 E-143-2002/-US

Express Mail Label No. EV339203197US
Attorney Ref. No. 4239-66190



COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled METHOD FOR THE TREATMENT OF MULTIPLE SCLEROSIS, the specification of which

☒ is attached hereto.

☐ was filed on _____ as United States Application No. _____.

☐ was described and claimed in PCT International Application No. _____, filed on _____, and as amended under PCT Article 19 on _____ (if applicable).

☐ and was amended on _____ (if applicable).

☐ with amendments through _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56. If this is a continuation-in-part application filed under the conditions specified in 35 U.S.C. § 120 which discloses and claims subject matter in addition to that disclosed in the prior copending application, I further acknowledge the duty to disclose material information as defined in 37 CFR § 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of an PCT International application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) on which priority is claimed:

Prior Foreign Application(s)	Country	Filing Date	Priority Claimed
			☐ Yes ☐ No

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
60/393,021	June 28, 2002

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or § 365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

PAGE 4/6 * RCVD AT 1/12/2004 7:41:43 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-2/1 * DNIS:7469195 * CSID:228 9446 * DURATION (mm-ss):02-04

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Express Mail Label No. EV339203197US
Attorney Ref. No. 4239-66190

Application No.	Filing Date	Status: patented, pending, abandoned
PCT/US02/38290	November 27, 2002	Pending

I hereby appoint the following attorney(s) and/or agent(s) associated with Customer Number 05318 to prosecute this application, to file a corresponding international application, and to transact all business in the Patent and Trademark Office connected therewith:

05318
NIH CUSTOMER NUMBER

with an Associate Power of Attorney to the following attorney(s) and/or agents(s) at the law firm of Klarquist Sparkman, LLP associated with Customer Number 36218:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventor's Signature _____ **Date** _____

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Inventor's Signature _____ **Date** _____

Name of Third Inventor: Bibiana Bielckova
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Citizenship: Slovakia

Inventor's Signature _____ **Date** _____

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